REST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

07409.0022

. CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			23				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2-3 minus 20=		· 3		Ī	X\$ 9=		OR	X\$18=	5400	
INDEPENDENT CLAIMS			5 minus 3 =		· a		ł	X40=		OR	X80=	160.0	
MU	LTIPLE DEPEN	DENT CLAIM PE	RESENT				ł	+135=		OR	+270=	700	
* If th difference in column 1 is less than zero, enter					r "0" in c	olumn 2	Ĺ	TOTAL		OR	TOTAL	924	
٠.	CI	LAIMS AS A	MENDED	- PAR	T II			101/12		011	OTHER	THAN	
		(Column 1)		(Colu	mn 2)	(Column 3)		SMALL E	NTITY	OR	SMALL E	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
NOM	Total		Minus	**		=	Ī	X\$ 9=		οŔ	X\$18=		
AME	Independent	*	Minus	***		=		X40=	7	OR	X80=		
	FIRST PRESE	NTATION OF MU	JUITPLE DEF	ENDEN	CLAIM		Ī	+135=		OR	+270=		
		-			V ⁻	- سیم	L	TOTAL	f		TOTAL ADDIT. FEE		
ه په د ټوپسې	(Column 1)				mn 2)	(Column 3)	,	ADDIT. FEE		•	-		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	•	Minus	**		=	ll	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=	-	OR	X80=		
L	FIRST PRESE	JLTIPLE DEI	PENDEN	TCLAIM			+135=		OR	+270=	·		
	*		· · · · · · · · · · · · · · · · · ·			• •	l	TOTAL		OR	TOTAL		
		(Column 1)		(Colu	mn 2)	(Column 3)	,	ADDIT. FEE		I OI1	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER	••	HIGI NUN PREVI	HEST MBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
ME	Total	AMENDMENT .	Minus	PAIL	FOR	=	 		FEE		V040	FEE	
AEN	Independent	*	Minus-	***		=		X\$ 9=	·	OR	X\$18=	<u> </u>	
¥	FIRST PRESENTATION OF M		ULTIPLE DEPENDEN		T CLAIM		1	X40=		OR	X80=	↓	
							_	+135=		OR	+270=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												